

**Bureau of Emergency Medical Services
New York State Department of Health**

**SWINE-ORIGIN INFLUENZA A (H1N1) VIRUS (S-OIV) INFECTION
ADVISORY UPDATE**

To: All EMS Agencies

From: Disaster Preparedness Unit

Date: May 8, 2009

Introduction

The Bureau of Emergency Medical Services is providing the following update regarding the Swine-Origin Influenza A (H1N1) Virus (S-OIV) Infection occurring in New York State.

The updated information contained is based on the guidance provided by DOH advisory #4 and is intended for providers seeing patients outside of New York City. For guidance related to providers seeing patients in New York City, see the New York City Department of Health and Mental Hygiene (NYCDOHMH) Advisories at: www.nyc.gov/health/nycmed.

This interim information is based on currently available information and may change as additional information becomes available. This update is current as of 5:00 PM on 5/7/09.

The entire DOH Advisory #4 text is available at: http://www.health.state.ny.us/diseases/communicable/influenza/h1n1/information_for_health_care_providers.htm

Due to accumulating evidence that S-OIV is comparable to seasonal influenza in its spectrum of illness and transmission pattern and does not appear to be causing unusual mortality compared to seasonal influenza, **NYSDOH is now recommending that infection control measures for S-OIV be similar to those taken for seasonal influenza**. These measures are consistent with recommendations developed and distributed by NYCDOHMH on 5/6/09.

What am I looking for?

There have been revisions to the Clinical Guidance for assessment of patients which are fully described in the DOH Advisory #4. Highlights of these revisions for EMS are patients presenting with:

Acute febrile respiratory illness defined as:

Fever of $\geq 100^{\circ}$ F.

And recent onset of at least one of the following:

Nasal congestion

Sore throat

Cough

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How can I prevent cross-contamination? (portions revised)

If you are treating a patient who complains of or exhibits influenza-like symptoms or acute febrile respiratory illness you should:

- Continue to use Universal precautions, (*Standard, Droplet and Contact*) for medical care of patients with confirmed or probable S-OIV, or febrile respiratory illness.
- EMS personnel should wear **surgical masks**, appropriately secured when treating a patient, and should don gloves and goggles/faceshield if providing direct patient care.
- The patient should be asked to wear a surgical mask if tolerated.
- **For aerosol-generating procedures**, such as suctioning, nebulizing treatment or intubation, EMS personnel should wear **N95 respirators**, gloves, and goggles/faceshield for the procedure.
- Hand hygiene is absolutely essential and should be performed before and after patient care, and before donning and after removal of a respiratory protection facemask.
- When care is completed, place all personal protective equipment (PPE) in a biohazard bag for appropriate disposal or cleaning.

Remember avoid potentially contaminating other areas of the ambulance vehicle or equipment, by removing potentially contaminated PPE when not caring for the patient or cleaning the ambulance.

Summary

The remaining sections of the previous BEMS advisory (April 28, 2009) are still consistent with existing guidance and information at this time.

This continues to be an evolving situation. Information and recommendations are being updated. Please remain vigilant in your response to influenza-like symptoms by keeping yourself informed and referring to the DOH website for the latest information and recommendations.

Information for the public can be accessed at the Swine Flu Hot Line:
1-800-808-1987

Approved by: Edward Wronski, Director

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